# ARIZONA CORPORATION COMMISSION UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESSARY

W-04137A Santa Rosa Water Company 9532 E. Riggs Rd. Sun Lakes, AZ 85248

RECEIVED

ACC UTILITIES DIRECTOR

# ANNUAL REPORT Water

FOR YEAR ENDING

12 31 2010

FOR COMMISSION USE

ANN 04

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# **COMPANY INFORMATION**

lailing Address <u>9532 E. Riggs Rd</u>	·	
(Street)	. 7	0.50.40
Sun Lakes	AZ	85248
(City)	(State)	(Zip)
(480) 895-4200	(480) 895-5455	
		~
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include Area Code)
_ `	Fax No. (Include Area Code)	Cell No. (Include Area Code)
Telephone No. (Include Area Code) mail Address	Fax No. (Include Area Code) 4607 S. Price Rd.	Cell No. (Include Area Code)
Telephone No. (Include Area Code) mail Address		Cell No. (Include Area Code)
Telephone No. (Include Area Code) mail Address	4607 S. Price Rd.	Cell No. (Include Area Code)
Telephone No. (Include Area Code)  mail Address  ocal Office Mailing Address2	4607 S. Price Rd. (Street)	
Telephone No. (Include Area Code)  mail Address  ocal Office Mailing Address 2  Sun Lakes	4607 S. Price Rd. (Street)  AZ	85248

### **MANAGEMENT INFORMATION**

X Management Contact:	Steve Soriano <u>V</u>	lice President / Ger	neral Manager
	(Name)	(7	Title)
9532 E. Riggs Rd.	Sun Lakes	AZ	85248
(Street)	(City)	(State)	(Zip)
(480) 895-4200	(480) 895-5455		
Telephone No. (Include Area Code)  Email  Address steve.soriano@robson.com	Fax No. (Include Area Code)	Cell No. (Incl	ude Area Code)
Telephone No. (Include Area Code)  Email  Address <u>steve.soriano@robson.com</u>	Fax No. (Include Area Code)	Cell No. (Incl	ude Area Code)
Telephone No. (Include Area Code) Email		Cell No. (Incl	ude Area Code)
Telephone No. (Include Area Code)  Email  Address <u>steve.soriano@robson.com</u>	Fax No. (Include Area Code)  Dave Voorhees	Cell No. (Incl	ude Area Code)
Telephone No. (Include Area Code)  Email Address steve.soriano@robson.com  On Site Manager:	Fax No. (Include Area Code)  Dave Voorhees (Name)		
Telephone No. (Include Area Code)  Email Addresssteve.soriano@robson.com_  On Site Manager:	Pax No. (Include Area Code)  Dave Voorhees (Name)  Sun Lakes	AZ	85248

Statutory Agent:	James Hubbard		
	(Name)		
9532 E. Riggs Rd.	Sun Lakes	AZ (State)	85248 (Zip)
(Street)	(City)	(State)	(Ziþ)
(480) 895-4200 Telephone No. (Include Area Code)	(480) 895-0136 Fax No. (Include Area Code	Ceil No. (Includ	te Area Code)
	·	Cen 1 (c) (mondo	3071104 (((340)
Attorney:	Marty Aronson (Name)		
One Camelback Rd.	Phoenix	AZ	85012
(Street)	(City)	(State)	(Zip)
(602) 263-2972 Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Includ	de Area Code)
	rax No. (mende Area code)	Con ito. (mena	de Med Code)
Email Address			
OV	NERSHIP INFORMATION	<u>N</u>	
Check the following box that applies to	your company:		
Sole Proprietor (S)	C Corporation (C)	(Other than Asso	ciation/Co-op)
Partnership (P)	🔀 Subchapter S Corp	ooration (Z)	
Bankruptcy (B)	Association/Co-op	(A)	
Receivership (R)	☐ Limited Liability (	Company	
Other (Describe)			
	<b>COUNTIES SERVED</b>		
Check the box below for the county/ies	in which you are certificated to pro-	vide service:	
<b>ДАРАСНЕ</b>	☐ COCHISE	☐ COCONIN	O
☐ GILA	☐ GRAHAM	GREENLE	E
☐ LA PAZ	☐ MARICOPA	☐ MOHAVE	
☐ NAVAJO	☐ PIMA	PINAL	
SANTA CRUZ	☐ YAVAPAI	☐ YUMA	
☐ STATEWIDE			

# **UTILITY PLANT IN SERVICE**

Acct.		Original	Accumulated	O.C.L.D.
No.	DESCRIPTION	Cost (OC)	Depreciation (AD)	(OC less AD)
301	Organization			
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements			
307	Wells and Springs			
311	Pumping Equipment			
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes			
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	0	0	0

This amount goes on the Balance Sheet Acct. No. 108

# CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR

Acct.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
301	Organization			
302	Franchises			<u></u>
303	Land and Land Rights			
304	Structures and Improvements			
307	Wells and Springs			
311	Pumping Equipment			
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes			
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	0	0	0

This amount goes on the Comparative Statement of Income and Expense \_\_\_\_\_\_ Acct. No. 403.

# **BALANCE SHEET**

Acct No.		BALANCE AT BEGINNING OF	BALANCE AT END OF
	ASSETS	YEAR	YEAR
	CURRENT AND ACCRUED ASSETS		
131	Cash	\$0	\$0
134	Working Funds		
135	Temporary Cash Investments		
141	Customer Accounts Receivable		
146	Notes/Receivables from Associated Companies		
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	TOTAL CURRENT AND ACCRUED ASSETS	\$0	\$0
		φυ	
	FIXED ASSETS		
101	Utility Plant in Service	\$0	\$0
103	Property Held for Future Use		
105	Construction Work in Progress		
108	Accumulated Depreciation – Utility Plant		
121	Non-Utility Property		
122	Accumulated Depreciation – Non Utility		
	TOTAL FIXED ASSETS	\$0	\$0
	TOTAL ASSETS	\$0	\$0

NOTE: The Assets on this page should be equal to Total Liabilities and Capital on the following page.

# **BALANCE SHEET (CONTINUED)**

Acct. No.		BALANCE AT BEGINNING OF	BALANCE AT END OF
	LIABILITIES	YEAR	YEAR
	CURRENT LIABILITES		
231	Accounts Payable	\$0	\$0
232	Notes Payable (Current Portion)		
234	Notes/Accounts Payable to Associated Companies		
235	Customer Deposits		
236	Accrued Taxes		
237	Accrued Interest		
241	Miscellaneous Current and Accrued Liabilities		
	TOTAL CURRENT LIABILITIES	\$0	\$0
	LONG-TERM DEBT (Over 12 Months)		
224	Long-Term Notes and Bonds	\$0	\$0
	DEFERRED CREDITS		
251	Unamortized Premium on Debt	\$0	\$0
252	Advances in Aid of Construction		
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax		
	TOTAL DEFERRED CREDITS	\$0	\$0
	TOTAL LIABILITIES	\$0	\$0
	CAPITAL ACCOUNTS		
201	Common Stock Issued	\$0	\$0
211	Paid in Capital in Excess of Par Value		
215	Retained Earnings		
218	Proprietary Capital (Sole Props and Partnerships)		
	TOTAL CAPITAL	\$0	\$0
	TOTAL LIABILITIES AND CAPITAL	\$0	\$0

# COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct. No.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
461	Metered Water Revenue	\$0	\$0
460	Unmetered Water Revenue		
474	Other Water Revenues		
	TOTAL REVENUES	\$0	\$0
	OPERATING EXPENSES		
601	Salaries and Wages	\$0	\$0
610	Purchased Water		
615	Purchased Power		
618	Chemicals		
620	Repairs and Maintenance		
621	Office Supplies and Expense		
630	Outside Services		
635	Water Testing		
641	Rents		
650	Transportation Expenses		
657	Insurance – General Liability		
659	Insurance - Health and Life		
666	Regulatory Commission Expense – Rate Case		
675	Miscellaneous Expense		
403	Depreciation Expense		
408	Taxes Other Than Income		
408.11	Property Taxes		
409	Income Tax		
	TOTAL OPERATING EXPENSES	\$0	\$0
	OPERATING INCOME/(LOSS)	\$0	\$0
<del>-</del>	OTHER INCOME/(EXPENSE)		
419	Interest and Dividend Income	\$0	\$0
421	Non-Utility Income		
426	Miscellaneous Non-Utility Expenses		
427	Interest Expense		
	TOTAL OTHER INCOME/(EXPENSE)	\$0	\$0
	NET INCOME/(LOSS)	\$0	\$0

### SUPPLEMENTAL FINANCIAL DATA Long-Term Debt

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
	N/A	-		
Date Issued				
Source of Loan				
ACC Decision No.				
Reason for Loan				
Dollar Amount Issued	\$0	\$	\$	\$
Amount Outstanding	\$0	\$	\$	\$
Date of Maturity				
Interest Rate	%	%	%	%
Current Year Interest	\$0	\$	\$	\$
Current Year Principle	\$0	\$	\$	\$

Meter Deposit Balance at Test Year End	\$0
M. t D it. D. C dad Danin a tha Tost Voor	40
Meter Deposits Refunded During the Test Year	\$0

COMPANY NAME	Santa Rosa Water Company	
Name of System:	ADEQ Public Water System Number:	

# WATER COMPANY PLANT DESCRIPTION

#### **WELLS**

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
N/A	N/A	N/A	N/A	N/A	N/A	N/A

<sup>\*</sup> Arizona Department of Water Resources Identification Number

#### **OTHER WATER SOURCES**

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
N/A	N/A	N/A

BOOSTER PUMPS		FIRE HYDRANTS		
Horsepower	Horsepower Quantity		Quantity Other	
N/A	N/A	N/A	N/A	

STORAGE TA	STORAGE TANKS		RE TANKS
Capacity	Quantity	Capacity	Quantity
N/A	N/A	N/A	N/A

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME	Santa Rosa Water Company	
Name of System:	ADEQ Public Water System Number:	

#### WATER COMPANY PLANT DESCRIPTION (CONTINUED)

MAINS					
Size (in inches)	Material	Length (in feet)			
2	N/A	N/A			
3					
4					
5					
6					
8					
10					
12					

#### **CUSTOMER METERS**

Size (in inches)	Quantity
5/8 X <sup>3</sup> / <sub>4</sub>	N/A
3/4	
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Turbo 4	
Comp. 6	
Turbo 6	

TREATMENT EQUIPMENT:

N/A

STRUCTURES:

N/A

OTHER:

N/A

For the following three items, list the utility owned assets in each category for each system.

Note: If you are filing for more than one system, please provide separate sheets for each system.

<b>COMPANY NAME:</b>	Santa Rosa Water Company
Name of System:	ADEQ Public Water System Number:

# WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2010

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)	GALLONS PURCHASED (Thousands)
JANUARY	0	0	0	0
FEBRUARY	0	0	0	0
MARCH	0	0	0	0
APRIL	0	0	0	0
MAY	0	0	0	0
JUNE	0	0	0	0
JULY	0	0	0	0
AUGUST	0	0	0	0
SEPTEMBER	0	0	0	0
OCTOBER	0	0	0	0
NOVEMBER	0	0	0	0
DECEMBER	0	0	0	0
	TOTALS →	0	0	0

What is the level of arsenic for each well on your system? N/A mg/l (If more than one well, please list each separately.)
If system has fire hydrants, what is the fire flow requirement? <u>N/A</u> GPM for <u>0</u> hrs
If system has chlorination treatment, does this treatment system chlorinate continuously? N/A ( ) Yes ( ) No
Is the Water Utility located in an ADWR Active Management Area (AMA)? N/A  ( ) Yes ( ) No
Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement? N/A  ( ) Yes ( ) No
If yes, provide the GPCPD amount:

Note: If you are filing for more than one system, please provide separate data sheets for each system.

<b>COMPANY NAME:</b>	Santa Rosa Water Company
Name of System:	ADEQ Public Water System Number:

# **UTILITY SHUTOFFS / DISCONNECTS**

MONTH	Termination without Notice Termination with Notice R14-2-410.B R14-2-410.C		OTHER
JANUARY	0	0	0
FEBRUARY	0	0	0
MARCH	0	0	0
APRIL	0	0	0
MAY	0	0	0
JUNE	0	0	0
JULY	0	0	0
AUGUST	0	0	0
SEPTEMBER	0	0	0
OCTOBER	0	0	0
NOVEMBER	0	0	0
DECEMBER	0	0	0
TOTALS →	. 0	0	0

OTHER (description):						
		-				
		-				<u> </u>
		<u> </u>	··			<del></del>
<u> </u>						

# **PROPERTY TAXES**

Amount of actual property taxes paid during Calendar Year 2010 was: \$			
Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.			
If no property taxes paid, explain why			

#### VERIFICATION **AND** SWORN STATEMENT **Taxes**

RECEIVE	~,
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ACC UTILITIES DIRECTOR **VERIFICATION** COUNTY OF (COUNTY NAME) Maricopa STATE OF Arizona NAME (OWNER OR OFFICIAL) TITLE Steve Soriano – Vice President/General Manager I. THE UNDERSIGNED COMPANY NAME Santa Rosa Water Company OF THE

DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2010

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

#### **SWORN STATEMENT**

I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

> SIGNATURE OF OWNER OR OFFICIAL (480) 895-4200 TELEPHONE NUMBER COUNTY NAME aricopa

> > SIGNATURE OF NOTARY PUBLIC

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

OTARY PUBLIC - ARIZONA A PICOPA COUNTY

THIS

DENENE A. TILL

DAY OF

20/1

December 31, 2013 MY COMMISSION EXPIRES

15

#### **INCOME TAXES**

For this reporting period, provide the following:	
Federal Taxable Income Reported	0
Estimated or Actual Federal Tax Liability	0
State Taxable Income Reported	0
Estimated or Actual State Tax Liability	<u> </u>
Amount of Grossed-Up Contributions/Advances	:
Amount of Contributions/Advances	0
Amount of Gross-Up Tax Collected	0
Total Grossed-Up Contributions/Advances	0
each Payer, and the date the Utility expects to m  CERTIFICATION	amount of gross-up tax collected, the amount of refund due to ake or has made the refund to the Payer.
prior year's annual report. This certification is	has refunded to Payers all gross-up tax refunds reported in the to be signed by the President or Chief Executive Officer, if a a partnership; the managing member, if a limited liability torship.
Show	4-28-11
SIGNATURE	DATE
Steve Soriano	Vice President/General Manager
PRINTED NAME	TITLE

# VERIFICATION AND SWORN STATEMENT Intrastate Revenues Only

	Intrastate revenues only
VERIFICATION	COUNTY OF COUNTY NAME. Maricona
	COUNTY OF (COUNTY NAME) Maricopa
STATE OF Arizona	
	NAME (OWNER OR OFFICIAL) TITLE Steve Soriano – Vice President/General Manager
I, THE UNDERSIGNED	
	COMPANY NAME Santa Rosa Water Company
OF THE	
DO SAY THAT THIS ANNUAL	UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION
	MONTH DAY YEAR
FOR THE YEAR ENDING	12 31 2010
HAS BEEN PREPAR	RED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS,
PAPERS AND RECO	RDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED
THE SAME, AND	DECLARE THE SAME TO BE A COMPLETE AND CORRECT
STATEMENT OF B	USINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD
	REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING
	BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.
SEI FORTH, TO THE	DEDI OI MI IRIO WEED OLI, IN COMMITTED TO THE COMMITTED T
SWORN STATEMENT	
IN ACCORDANCE U	VITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-
IN ACCURDANCE W	TODE OF A TUMES IT IS HEDEIN DEPODTED THAT THE CDOSC
	ISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS
	NUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE
<u>UTILITY OPERATIO</u>	NS DURING CALENDAR YEAR 2010 WAS:
	A description of the Court of t
	Arizona Intrastate Gross Operating Revenues Only (\$)
	\$ 0

(THE AMOUNT IN BOX ABOVE INCLUDES \$\_\_\_\_\_ IN SALES TAXES BILLED, OR COLLECTED)

AGE MUST OR

\*\*REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES LSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

MY COMMISSION EXPIRES

DENENE A. TILL

NOTARY PUBLIC - ARIZONA

ARRICOPA COUNTY

ANY Commission Expires

December \$1, 2013

MONTH April 20/

(480) 895-4200

SIGNATURE OF OWNER OR OFFICIAL

TELEPHONE NUMBER

Denue a: July
SIGNATURE OF NOTARY PUBLIC

#### VERIFICATION AND SWORN STATEMENT RESIDENTIAL REVENUE **Intrastate Revenues Only**



VERIFICATION

STATE OF AR	IZONA
-------------	-------

COUNTY OF (COUNTY NAME) Maricopa

I, THE UNDERSIGNED

NAME (OWNER OR OFFICIAL) Steve Soriano

TITLE Vice President/General Manager

OF THE

COMPANY NAME Santa Rosa Water Company

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH YEAR. DAY 12 31 2010

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

#### SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2010 WAS:

ARIZONA INTRASTATE GROSS OPERATING REVENUES

THE AMOUNT IN BOX AT LEFT **INCLUDES \$ 0** 

NOTARY PUBLIC NAME

IN SALES TAXES BILLED, OR COLLECTED)

\*RESIDENTIAL REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED.

SIGNATURE OF OWNER OR OFFICIAL

(480) 895-4200

TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

**THIS** 

DAY OF

(SEAL)



DENENE A. TILL NOTARY PUBLIC - ARIZONA MARICOPA COUNTY My Commission Expires

**MY COMMISSION EXPIRES** 

December 31, 2013

chene A. Till COUNTY NAME .20 // MONTH